

# APPLICATION FOR UNDERGRADUATE ADMISSION to Idaho's Public Colleges & Universities

For office use only

Mail the completed application or a photocopy along with the appropriate nonrefundable application fee(s) to each Idaho public institution to which you are applying.

Copy of file located at <http://admissions.boisestate.edu/commonapplication.pdf>

## Applying to:

☐ **Boise State University**  
1910 University Dr.,  
Boise, ID 83725-1320  
Fee: \$30 ..... **1-800-824-7017**  
[www.boisestate.edu](http://www.boisestate.edu)

☐ **Lewis-Clark  
State College**  
500 8th Ave.,  
Lewiston, ID 83501  
Fee: \$35 ..... **1-800-933-LCSC**  
[www.lcsc.edu](http://www.lcsc.edu)

☐ **College of  
Southern Idaho**  
PO Box 1238,  
Twin Falls, ID 83303  
Fee: None ..... **(208) 733-9554**  
[www.csi.edu](http://www.csi.edu)

☐ **North Idaho College**  
1000 W. Garden Ave.,  
Coeur d'Alene, ID 83814  
Fee: \$25 ..... **(208) 769-3311**  
[www.nic.edu](http://www.nic.edu)

☐ **Eastern Idaho  
Technical College**  
Student Services: 1600 S. 25th E.,  
Idaho Falls, ID 83404  
Fee: \$10 ..... **1-800-662-0261**  
[www.eitc.edu](http://www.eitc.edu)

☐ **University of Idaho**  
PO Box 444264  
Moscow, ID 83844-4264  
Fee: \$40 ..... **1-888-884-3246**  
[www.uidaho.edu](http://www.uidaho.edu)

☐ **Idaho State University**  
Office of Admissions,  
Box 8270  
Pocatello, ID 83209  
Fee: \$30 ..... **(208) 282-2475**  
[www.isu.edu](http://www.isu.edu)

**Start Date:** ☐ Fall, 20\_\_\_\_ ☐ Spring, 20\_\_\_\_ ☐ Summer, 20\_\_\_\_ ☐ Summer & Fall, 20\_\_\_\_

## APPLICANT INFORMATION

**Name:** \_\_\_\_\_ **Name You Prefer:** \_\_\_\_\_  
(as on Soc. Sec. Card) last first middle

**Other Names Appearing on Records:** \_\_\_\_\_

**U.S. Social Security Number:** \_\_\_\_\_ **Date of Birth (mo/day/year):** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Permanent Home Address:** \_\_\_\_\_  
number & street/PO box city county state zip area code phone

**Current Mailing Address:** \_\_\_\_\_  
number & street/PO box city county state zip area code phone

Mailing Address valid until the following date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ **E-mail Address:** \_\_\_\_\_

## GENERAL INFORMATION

**Citizenship:** ☐ USA ☐ Other **Native Language:** ☐ English ☐ Other: \_\_\_\_\_

If citizenship is "other," answer the following questions: Country of citizenship: \_\_\_\_\_

Resident alien of U.S.: ☐ Yes, Resident alien number: A- \_\_\_\_\_ ☐ No, Current visa type: \_\_\_\_\_

**Gender: (optional)** ☐ Female ☐ Male **Are you a U.S. Veteran:** ☐ Yes ☐ No Dates of Service \_\_\_\_\_ to \_\_\_\_\_

**Ethnicity: (optional)** ☐ African American/Black ☐ American Indian/Native American/Alaska Native ☐ Asian American  
☐ Caucasian/White ☐ Native Hawaiian or other Pacific Islander ☐ Hispanic/Latino/Latina  
☐ Other: \_\_\_\_\_

**Highest level of education or degree attained by either parent:** ☐ Bachelor Other Degree \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_  
(For ALL to complete. If under 18, list parents or guardians here.) name relationship

\_\_\_\_\_ number & street/PO box city county state zip area code phone

## ENROLLMENT INFORMATION

**Intended Degree Type:** ☐ Certificate ☐ Associate ☐ Bachelor ☐ Second Bachelor ☐ Not Seeking Degree or Certificate

**Program Type:** ☐ Academic Program ☐ Professional Technical Program

**Intended Major** (Refer to each institution's publication for a list of majors offered): \_\_\_\_\_

first

second (optional)

☐ Undecided

**Enrollment Status:** ☐ New ☐ Transfer ☐ Returning (readmission) ☐ High School Student Seeking Dual Enrollment

**Do you plan to apply for federal financial aid?** ☐ Yes ☐ No

**Campus Location:** If planning to take courses primarily at outreach locations, list these locations: \_\_\_\_\_

• Complete Reverse Side •

Name: \_\_\_\_\_

## ACADEMIC INFORMATION

Have you taken the: ☐ ACT: Date \_\_\_\_\_ ☐ SAT: Date \_\_\_\_\_ ☐ COMPASS: Date \_\_\_\_\_

List the last high school you attended and any schools since, including colleges, trade schools, correspondence, etc. *Do not omit any schools. Attach a separate sheet if more space is needed. Failure to list all schools attended, or submission of inaccurate information, is considered fraud and is cause for refusal of admission or dismissal from the institution. Students seeking certificates or degrees must have official transcripts submitted from each school listed. To be considered official, transcripts must be mailed in a sealed envelope directly from the school to the institution's admissions office.*

DID/WILL YOU GRADUATE FROM HIGH SCHOOL? ☐ Yes (month/year \_\_\_\_\_/\_\_\_\_\_) ☐ No

High School \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

DO YOU HAVE A GED OR HIGH SCHOOL EQUIVALENCY CERTIFICATE? ☐ Yes (month/year \_\_\_\_\_/\_\_\_\_\_) ☐ No

If yes, degree-seeking applicants are required to submit official GED test scores.

Are/were you a Tech Prep Student? ☐ Yes ☐ No If yes, in which program area did you enroll? \_\_\_\_\_

Name of College, Trade School, etc.	City & State	Dates Attended	Grad. Date	Degree/# Credits Earned

## RESIDENCY

Idaho residency status MAY be determined by one or more of the following. Please check all statements that are applicable if claiming Idaho residency for *tuition purposes*. Residency for community colleges is determined by county of residence.

State of Residence: \_\_\_\_\_ From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ If less than 12 months, previous state: \_\_\_\_\_

County of Residence: \_\_\_\_\_ From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ If less than 12 months, previous county: \_\_\_\_\_

- ☐ One or more of my parents/legal guardians or spouse's parents is a resident of Idaho and has maintained a bona fide domicile in Idaho for at least one year prior to the opening day of the school term during which I plan to enroll. If I am a community college applicant, I receive at least 51% of my financial support from my parents/legal guardians.

Parent's name \_\_\_\_\_  
and address \_\_\_\_\_ From \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

- ☐ I receive less than fifty percent of my financial support from parents or legal guardians who are not residents of Idaho for voting purposes. I have continuously resided in Idaho for at least 12 months before the opening day of the school term at this institution. I have been employed full-time in Idaho for the past 12 months.
- ☐ I am a graduate of an accredited Idaho high school and I will attend this institution during the term immediately following graduation. If I am a community college applicant, this item may not be applicable to determine residency.
- ☐ I am married to an Idaho resident. My spouse is a resident of \_\_\_\_\_ County.
- ☐ I or my spouse is a member of the Armed Forces stationed in Idaho on military orders, or Idaho is my or my spouses designated military home of record. I or my spouse is stationed in \_\_\_\_\_ County. Records may be requested.
- ☐ One or more of my parents or legal guardians, from whom I receive fifty percent or more of my support, is a member of the Armed Forces stationed in Idaho. They are stationed in \_\_\_\_\_ County. Records may be requested.
- ☐ I have been separated under honorable conditions from the Armed Forces after at least two years of service. At the time of separation, I designated the State of Idaho as my intended domicile or indicated Idaho as my home of record, and I am entering this institution within one year of the date of separation. Records may be requested.
- ☐ I have been away from the State of Idaho for a period of less than one calendar year. I have not established legal residence elsewhere. I was a resident of the State of Idaho for a continuous twelve month period immediately prior to departure.
- ☐ I am a member of one of the following Idaho American Indian tribes: Coeur d'Alene; Shoshone-Paiute; Nez Perce; Shoshone-Bannock; Kootenai. Records may be requested.

## SIGNATURE

In signing this form, I acknowledge that failure to disclose and submit accurate information may result in denial of admission or dismissal from the institution. I certify that all information provided is complete and true. By signing this application, I certify that I am in compliance with the Federal Military Selective Service Act, 50 U.S.C. sec. 453, or that I am exempt from the same. Men between the ages of 18 and 25 must be registered with Selective Service to be eligible for enrollment at a state college, to receive state and federal financial aid, and to be employed in a state or federal job. You may register with Selective Services on-line at <http://www.sss.gov>

Acceptance or receipt of financial aid and scholarship awards certifies that the funds will be used for educational purposes.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Idaho public colleges subscribe to the principles and laws of the State of Idaho and the Federal Government, including applicable executive orders pertaining to civil rights. These institutions are committed to the policy that all persons shall have equal access to programs and facilities without regard to age, color, creed, marital status, national or ethnic origin, physical handicap, race, religion, or sex.

Revised 6/02